

Texas Department of State Health Services

Medical Home Learning Collaborative

FY19 Quarter 3 Meeting April 24, 2019

Housekeeping



Texas Department of State Health Services

- All lines are in listen only mode
 - To speak, click the raise hand icon and the organizer will unmute your line
- If your computer does not have a mic, please use the phone for audio (phone is preferred)
 - Dial audio pin to enable audio
- Use the Question box to:
 - Communicate with organizers
 - Ask the speaker a question
 - Get help with technical difficulties
- Today's call will be recorded
- Agenda and PDF of slides are available in the Handouts section



Agenda

- 1. Welcome & Housekeeping
- 2. Dental Care for Children with Special Health Care Needs Presented by Dr. Rhonda Stokley
- 3. Medical Home Supports Contractor Updates
- 4. CSHCN Systems Development Group Updates
- 5. Upcoming Events
- 6. Other Member Updates and Events
- 7. Resources Oral Health, Autism, Summer Camp
- 8. Adjourn



Texas Department of State Health Services

Dental Care for Children with Special Health Care Needs

Rhonda Stokley, DDS

State Public Health Dental Director
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Dental Care for Children with Special Healthcare Needs

April 24, 2019

Rhonda Stokley, DDS

State Public Health Dental Director

Rhonda Stokley, DDS

- State Public Health Dental Director at Texas Department of State Health Services
- Dentist for 14 years
- Private practice owner
- Dental Director at Austin State
 Supported Living Center



Overview of Presentation

- Why does oral health matter and how does it affect the rest of the body?
- Oral health statistics
- Dental care for children with special healthcare needs
- What is a dental home?



Why does oral health matter and how does it affect the rest of the body?

Benefits of Good Oral Health

- Eating
- Speaking
- Face shape
- Appearance/self-confidence
- Primary teeth are place holders for permanent teeth



Consequences of Oral Disease

- Pain and infection, can be lifethreatening
- Missed school
- Difficulty concentrating
- Difficulty sleeping

- Difficulty speaking
- Difficulty eating
- Loss of self-esteem
- Inflammation in mouth can affect the rest of the body

Oral Health and the Rest of the Body

- Aspiration Pneumonia
- Diabetes
- Heart Disease
- Pre-term birth
- Alzheimer's Disease



Oral Health Statistics

Understanding the oral health landscape in Texas

Oral Health in Texas CSHCN

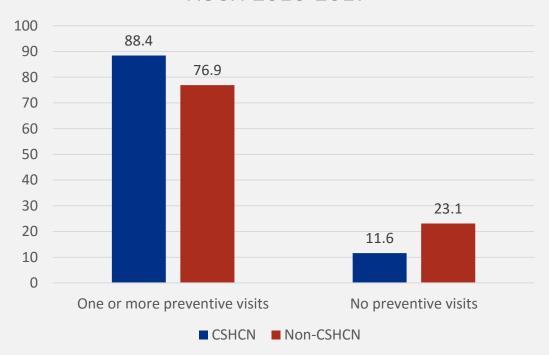
- National Survey of Children's Health (NSCH)
- Nationwide, 66.3% of CSHCN were reported to have excellent or very good teeth compared to 55.9% of CSHCN in Texas.
- In Texas, 55.9% of CSHCN were reported to have excellent or very good teeth compared to 78.5% of children without special health care needs.





Oral Health in Texas CSHCN

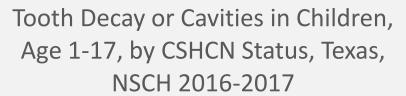
Preventive Dental Visits in Children, Age 1-17, by CSHCN Status, Texas, NSCH 2016-2017

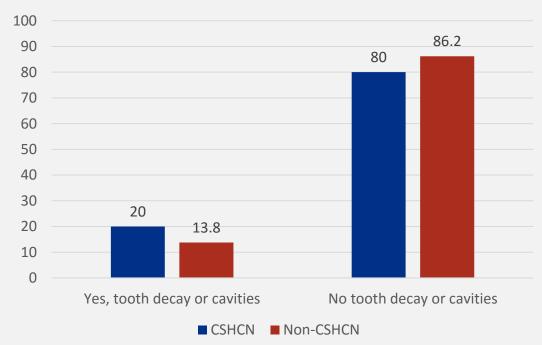


- Overall, 79.5% and 79.0% of all children, age 1-17, nationwide and in Texas, respectively, were reported to have one or more preventive dental visits in the past year.
- Nationwide, 84.3% of CSHCN were reported to have one or more preventive dental visits compared to 88.4% of CSHCN in Texas.
- 88.4% of CSHCN in Texas were reported to have one or more preventive dental visits compared to 76.9% of children without special health care needs (chart).

Source: 2016-2017 National Survey of Children's Health (NSCH) Prepared by: Maternal and Child Health Epidemiology Unit

Oral Health in Texas CSHCN





*Interpret with caution: estimate may not be reliable due to wide confidence intervals.

Source: 2016-2017 National Survey of Children's Health (NSCH) Prepared by: Maternal and Child Health Epidemiology Unit

- Overall, 11.7% and 14.8% of all children, age 1-17, nationwide and in Texas, respectively, were reported to have decayed teeth or cavities.
- Nationwide, 15.9% of CSHCN were reported to have decayed teeth or cavities compared to 20.0% of CSCHN in Texas.
- In Texas, 20.0% of CSHCN were reported to have decayed teeth or cavities compared to 13.8% of children without special health care needs. (chart).

Dental Care for Children with Special Healthcare Needs

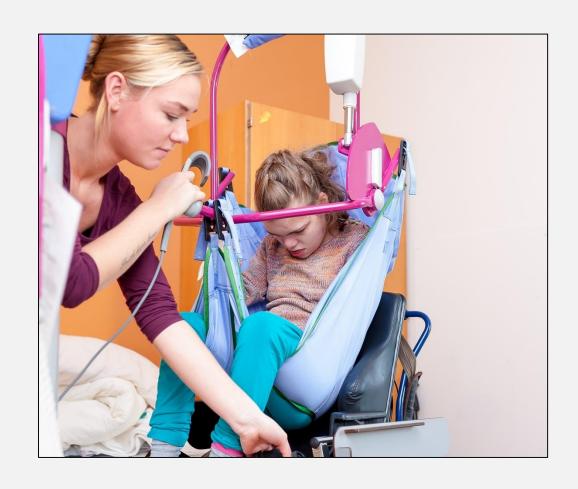
Common Dental Concerns for CSHCN

- Cleft lip/palate
- Tube feeding
- Medications
- Enamel quality
- GERD (reflux)
- Bad breath
- Xerostomia (dry mouth)
- Altered eruption
- Malocclusion



Common Dental Concerns for CSHCN

- Tactile sensitivity
- Oral aversions
- Pouching of food
- Cognitive ability
- Wheelchairs
- Physical contractures
- Bruxism (tooth grinding)
- Tongue thrust
- Self injurious behavior (SIB)



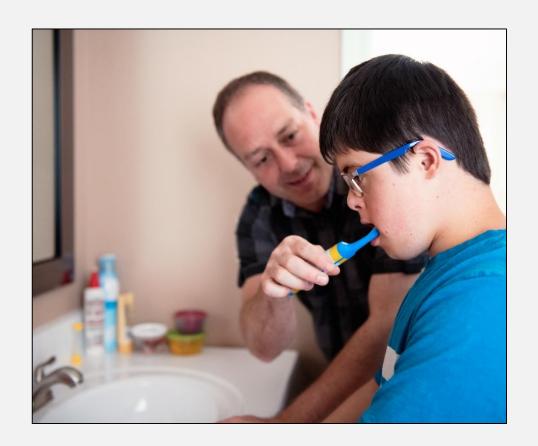
Tube feeding

- Gastrostomy/Gastric tubes go through the skin into the stomach
- No foods/liquids by mouth
- Oral hygiene is still important!
- Heavier calculus (tartar) buildup
- Increase of certain diseasecausing bacteria in the mouth
- Bad breath



Home Care

- Food and Drink
- Toothbrushes and Brushing
- Toothpastes and Mouth Rinses
- Floss and Flossing



Food and Drink

- Encourage healthy food choices
- Limit snacks—don't graze
- Drink water
- Limit soda and fruit juice
- Avoid food/drinks as a reward or bribe
- Brush it off at bedtime!



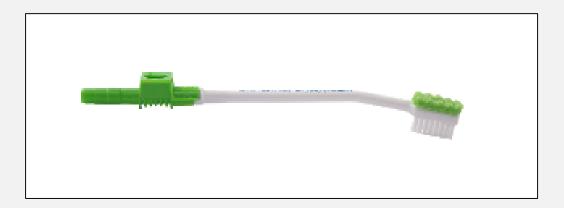
Toothbrushes

- One size does not fit all
- Mechanical vs Power
- Adaptive toothbrushes allow for independence
- Tell, Show, Do
- Creative tooth brushing
 - Songs
 - Tooth brushing apps
 - Make a video
 - Brush in a different room—doesn't have to be the bathroom

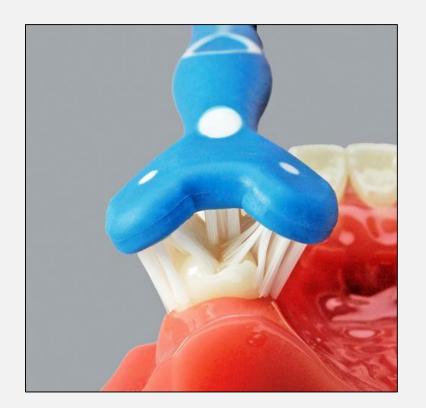


2 Special Kinds of Toothbrushes

Suction Toothbrush

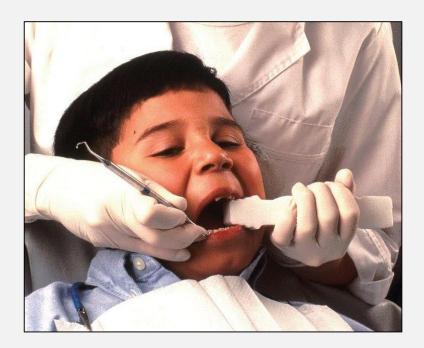


• 3-sided toothbrush



Mouth Props/Bite Blocks





Toothpastes and Mouth Rinses

- Look for toothpastes without sodium lauryl sulfate (causes foam)
- Try a flavor other than mint (bubblegum, etc.)
- Use a toothpaste with <u>fluoride</u>
- Consider products for people with dry mouth

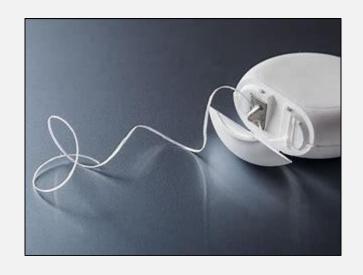
- Dentist may prescribe a mouth rinse or toothpaste
- Don't swallow large amounts of toothpaste or mouth rinse
- Use the right amount of toothpaste:
 - Grain of rice up to age 3
 - Pea for ages 3-6

Floss and Flossing

- A toothbrush cannot clean between teeth
- Traditional string floss
- Floss on a stick









What is a dental home?

The Dental Home Concept

From the American Academy of Pediatric Dentistry:

Definition of Dental Home



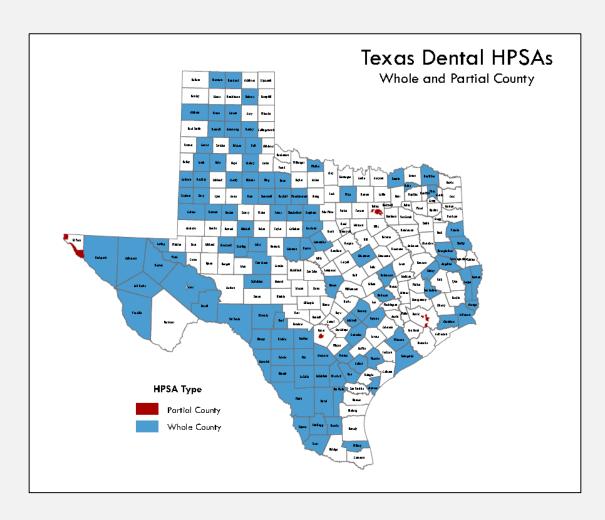
• The dental home is the ongoing relationship between the dentist and the patient, inclusive of all aspects of oral health care delivered in a comprehensive, continuously accessible, coordinated, and family-centered way. The dental home should be established no later than 12 months of age to help children and their families institute a lifetime of good oral health. A dental home addresses anticipatory guidance and preventive, acute, and comprehensive oral health care and includes referral to dental specialists when appropriate.

Dental Appointments

- Find a dentist who is comfortable with your child's needs. But how?
 - Pediatric dentists
 - General dentists
 - Pediatrician referral
 - Parent groups
 - Call and ask an office you're interested in
- Your child may need more frequent dental visits because of high risk for cavities, heavy plaque/tartar buildup, inability to tolerate long appointments



Dental Workforce Shortages



Preparing for the Dental Visit

- Speak positively about the dentist
- Help them understand what to expect and what is expected of them
- Look at books about going to the dentist
- Make a social story about visiting the dentist



Dental Desensitization

Dental desensitization of children with Autism Spectrum Disorder

- Able to achieve a minimum threshold exam
 - 77.4% in 1-2 visits
 - 87.5% in 5 visits or less

Predictors of desensitization success:

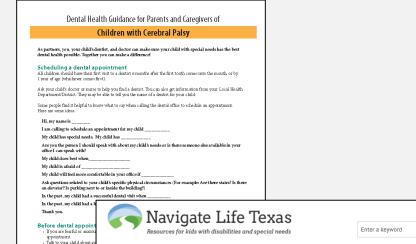
- 1. Ability to be involved in group activities
- 2. Ability to communicate verbally is helpful, but many rated non-verbal by parents were successful
- 3. Ability to follow one-step instructions

Protective Stabilization, Sedation, Anesthesia

- Protective stabilization includes restraint by a person or mechanical restraint
- Sedation can be inhalation, oral, or IV and have varying depths
- Anesthesia can occur in a hospital or in a dental office

Helpful Links

- https://dental.washington.ed u/dept-oral-med/specialneeds/patients-with-specialneeds/
- https://www.scdaonline.org/ page/Factsheets
- https://www.navigatelif etexas.org/en





During the course of your radiation therapy, many normal structures will inadvertently be irradiated because they lie within the treatment field. This can lead to complications following radiation therapy. Below, are possible complications and some steps you can take to prevent or minimize them

FACTS FOR PATIENTS & CAREGIVERS

Special Care

The sore mouth and taste loss often experienced during radiation therapy (Mucositis.) usually occurs two weeks after the start of treatment and improves after the treatments have stopped. Because of the irradiation of the taste buds, patients may develop a partial (hypogeusia) or complete (ageusia) loss of taste during treatment. Usually the sense of taste returns within four months after treatment, although permanent strong mouthwashes and leave your dentures out. These can be refitted or remade after your tissues have





A dry mouth (Xerostomia) occurs because salivary glands are particularly sensitive to radiation. During irradiation, the glandular secretions are usually diminished, thick, sticky, and can be very bothersome to the patient. Depending on the radiation portals, there may be some regeneration several months after treatment and the undesirable signs and symptoms of xerostomia, (discomfort, difficulty in speech and swallowing) are at least partially reversed. If the major salivary glands are within the field, 90% or more of the salivary flow can be lost by the end of the treatments. This effect may very gradually reverse to some extent following the is often a permanent problem. Frequent sips of water and water rinses are particularly helpful for partial control of radiation-induced xerostomia. Your doctor can recommend other products that may help keep your mouth

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Dental Care for Children with Disabilities

Insurance &

Financial Help

Video: Dental >

help your child at the app office staff.

Make the dental appoint

Tell the dental office the

Let the dental office know If your child is in a wheel

the dental chair, ask the d



Home > Diagnosis & Healthcare > Dental Care

Your life might be flooded with physical therapy and doctor's visits, but chances are there are a few sticky notes on your refrigerator about calling the dentist. It's easy to put this off when your child's teeth look just fine, but dentists recommend scheduling the first checkup around the 1st birthday. They want to make sure those little teeth are making a healthy entry.

Family

Sometimes a disability or special health-care need affects the health of a child's teeth and gums. It might

be harder to brush teeth, clean gums, and avoid tooth decay. So, you really need a dentist who can be a good partner for your family. It's important to find a dentist who respects your child's differences - and one who understands sensory issues, anxiety disorders, or other unique

How to Find a Dentist



Diagnosis A-Z List

Españo

Transition

Education &

Schools

Children with Multiple Disabilities, Rare Conditions or are Undiagnosed

What to Do If You Suspect Something Is

My Child Has a Diagnosis. Where Do I

What is the Early Childhood Intervention (ECI) Program?

Summary

- Proper home care is important for all children, especially CSHCN
- Find what works for your child in terms of home care and stick to the routine
- Make regular dental visits a part of your child's life

Thank you!

Dental Care for Children with Special Healthcare Needs

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Texas Department of State Health Services

MCH Medical Home Supports Contractor Updates

South Texas Assessment & Referral Services (STARS) Clinic

University of Texas Health Science Center at Houston – CHOSeN Clinic



Texas Department of State Health Services

CSHCN Systems Development Group Updates



Upcoming Events

- 2019 Texas Primary Care Consortium Annual Summit
 - June 20-21 in Austin
- Texas Parent to Parent 15th Annual Statewide Conference
 - June 21-22 in San Antonio
- 2019 Texas System of Care and Community Resource Coordination Group Conference
 - July 17-19 in Austin
- 11th Annual Adventures in Autism Intervention & Research Conference
 - July 20 in Denton
- Save the Date 19th Annual Partners in Prevention Conference: accepting <u>exhibitor applications</u> until July 1
 - Nov. 5-7 in Austin



Texas Department of State Health Services

Other Member Updates and Upcoming Events

TEXAS Health and Human Services Texas Department of State Health Services

Oral Health Resources

- Oral Health of Patients with Developmental
 <u>Disabilities</u> webinar presented by National Network for Oral Health Access
 - April 30, 3pm 4pm CT
- Patient-Centered Primary Care Collaborative recorded webinar – <u>Putting the Mouth Back in the Body</u>
- National Maternal and Child Oral Health Resource Center – Oral Health Care for Children and Adolescents with SHCN
 - Special Care modules for oral health professionals
 - Getting to Know me Form to help dentists get to know their patients with special health care needs

Oral Health Resources (cont.)

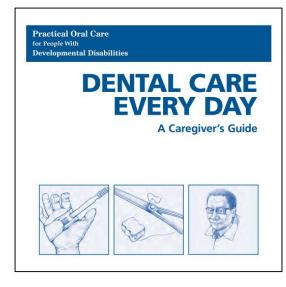
- The National Institute of Dental and Craniofacial Research has many guides on oral care for individuals with disabilities
 - Caregiver's guide to oral care for a family member with special needs

TEXAS
Health and Human Services

Texas Department of State

Health Services

- Practical oral care packets for people with autism, cerebral palsy, Down syndrome, and intellectual disabilities
- Wheelchair transfer guide for health care providers



Make the toothbrush easier to hold.



The same kind of Velcro® strap used to hold food utensils is helpful for some people.



Others attach the brush to the hand with a wide elastic or rubber band. Make sure the band isn't too tight.

Make the toothbrush handle bigger.



You can also cut a small slit in the side of a tennis ball and slide it onto the handle of the toothbrush



You can buy a toothbrush with a large handle, or you can slide a bicycle grip onto the handle. Attaching foam tubing, available from home health care catalogs, is also helpful.

Try other toothbrush options.



A power toothbrush might make brushing easier. Take the time to help your client get used to one. Guide the toothbrush.

Help brush by placing your hand very gently over your client's hand and guiding the toothbrush. If that doesn't work, you may need to brush the teeth yourself.

TEXAS Health and Human Services Texas Department of State Health Services

Autism Awareness Month

- Autism Spectrum Disorder: What Every Parent Needs to Know
 - 2nd edition is revised and fully updated
- Autism resources and services
 - Autism Speaks
 - Autism Society of Texas
 - Autism Navigator
 - Children's Autism Program

TEXAS Health and Human Services Texas Department of State Health Services

Summer Camps and Activities

- Summer camp season is approaching fast!
- Navigate Life Texas <u>Sending Your Child to Camp</u>
- Resources to find camps for children with disabilities and special health care needs:
 - o Pacer Center
 - Very Special Camps
 - o Camp for All
 - American Camp Association Search for all types of camps
- Project LEAP accepting applications for LEAP I (June 7-16) and LEAP II (July 19-28)
 - Deadlines: LEAP I May 3; LEAP II June 14



Additional Resource

- New: <u>National Network for Advancing Systems of Services for Children and Youth with Special</u>
 Health Care Needs
 - National network of technical assistance resource centers formed in response to the need for more training and technical assistance to help advance the system of services for CYSHCN

Upcoming Meetings

- Transition to Adulthood Learning Collaborative
 - o May 15, 2019
 - 12-1:30 via webinar or M-204
- Medical Home Learning Collaborative
 - o July 17, 2019
 - 10 11:30 via webinar or M-204





Texas Department of State Health Services

Thank you!

Please take the post-call survey. We value your feedback!

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